Intimate Partner Violence Screening in the Emergency Department

Abstract

Problem: Intimate partner violence (IPV) is a public health concern that affects one in three women worldwide. IPV can be addressed through identification and early intervention with minimal risk to the patient. The emergency department is an important setting for screening given the frequency with which people who experience abuse may present with IPV-related injuries and other related concerns (depression, suicidality, etc.). Successfully implementing a validated tool for screening and providing early access to resources and referrals may help to mitigate the long-term negative impacts of IPV. The need for increased staff education was a major barrier to screening for IPV.

Methods: This quality improvement project was conducted utilizing a cohort design via retrospective chart review following the PDSA model. The Relationship Health and Safety Screen (RHSS) was to be administered to females aged 18 years and older presenting to the emergency department during the period of this quality improvement project. Data collected from patients included the number of screenings administered, and the number of positive and negative screenings. Further, staff were provided with education regarding IPV and the RHSS and were given pre-, post-, and post-implementation surveys to measure their knowledge, confidence, and skills over time.

Results: A total of 9 screenings were performed on women post implementation of the RHSS. From the survey results there were statistically significant improvements in perceived knowledge and perceived skill $F(1.426, 19.967) = 10.940, p < .002$ and $F(1.316, 18.425) = 15.834, p < .001$ respectively, though clinically all scores improved from pre-test to post-implementation.

Implications for Practice: Universal screening for IPV using the RHSS in Emergency Department settings could provide early access to resources and referrals and mitigate long term negative impacts of IPV.

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